Statement TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 2,	FUDMENTI	NDMENT TR	ANSMI	TTAL LE	TTER	Do 04393/0	cket No 20230	
vention: METHOD OF ENHANCING HOMOLOGOUS RECOMBINATION OF SOMATIC METHOD OF CONSTRUCTING SPECIFIC ANTIBODY TO THE COMMISSIONER FOR PATENTS Fransmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED Claims Highest Number Extra Claims Previously Amendment Paid Previously Paid Present Rate Total Claims 14 - 20 =			I - I			1	Art U	
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Total Claims 14 - 20 = x Independent Claims 3 - 3 = x Multiple Dependent Claims (check if applicable) Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within third month; Supplemental Information Disclosure Statement TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 2, X Large Entity No additional fee is required for this amendment. X Please charge Deposit Account No. 04-0100 in the amount of \$ 2,100.0 A duplicate copy of this sheet is enclosed. A check in the amount of \$ to cover the filling fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. 04-04-04 as described below. A duplicate copy of this sheet is enclosed. X Credit any overpayment.	After	After I	Previously	Extra Claims	Rate			
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Shilpa V. Patel Attorney/Agent Reg. No.: 57,983	Wada sa	l par jas	2		Dated:	June 22	, 2009	
DARBY & DARBY P.C.		! Reg. No.: 57,983)					
P.O. Box 770 Church Street Station New York, New York 10008-0770 (212) 527-7700	ent Reg. No.: 57,9 ARBY P.C.	_						